

UST-20 COVER SHEET

MONTHLY FINANCIAL REPORT FOR
INDIVIDUAL(S) NOT ENGAGED IN BUSINESS

Case No.

09-19609

Report Month/Year

OCT 2009

Debtor

KARL REINKE

INSTRUCTIONS: The debtor's monthly financial report shall include a cover sheet signed by the debtor and all UST forms and supporting documents. Exceptions, if allowed, are noted in the checklist below. Failure to comply with the reporting requirements of Local Bankruptcy Rule 2015-2(a), or the U.S. Trustee's reporting requirements, is cause for conversion or dismissal of the case.

The debtor submits the following with this monthly financial report:

Yes No

UST-21

Comparative Balance Sheet, or debtor's balance sheet.

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The debtor's balance sheet, if used, shall include a breakdown of pre- and post-petition liabilities. The breakdown may be provided as a separate attachment to the debtor's balance sheet.

UST-22

Summary of Receipts

☐☐

UST-23

Summary of Disbursements

☐☐

UST-23

Financial Account Detail

☒☐Continuation
Sheets

A Continuation Sheet shall be completed for each bank account or other source of debtor funds and shall include a copy of the monthly bank statement and supporting documents as described in the instructions.

UST-24

Other Financial Disclosures - Real Estate and Property Sales

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Part A

When applicable, include a report of sale. Attach supporting documents such as an escrow statement for the sale of real property, or an auctioneer's report for property sold at auction.

UST-24

Other Financial Disclosures - Insurance, etc.

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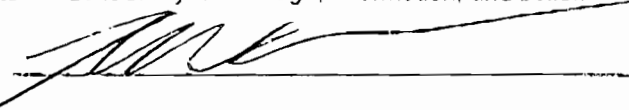
Part B

For any changes or renewals of insurance coverage, include a copy of the new certificate of insurance.

DEBTOR'S CERTIFICATION

I certify under penalty of perjury that the information contained in this monthly financial report are complete, true, and accurate to the best of my knowledge, information, and belief.

Signature(s):



E0

Date:

11/14/2009

E0

The debtor, or trustee, if appointed, must sign the monthly financial report. Debtor's counsel may not sign a financial report for the debtor.

Debtor

KARL REINICK

Case Number

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09-19609

Report Mo/Yr

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OCT. 2009**UST- 21 STATEMENT OF FINANCIAL CONDITION**

INSTRUCTIONS: This balance sheet has been designed for ease of use by debtors not engaged in business. Accordingly, it is not intended to follow standard accounting principles. For funds held in financial institutions or brokerages, the debtor must report the month-end value. For each remaining asset, the debtor may use the value listed in the last filed Schedule A & B, or the current value. Footnotes or explanations, if any, may be attached to this page.

As of month ending ⇒		OCT. 2009	
ASSETS			
Cash		210.00	
Checking Account(s)		(282.80)	
Savings Account(s)		1,011.52	
Investment/Brokerage Account(s)			
IRA/Retirement Account(s)		10,387.55	
Remaining Personal Property (per Schedule B but excluding all accounts listed above)		15,000.00	
Real Property (Schedule A)			
1. 923 N. 76TH ST. SEATTLE		416,000	
2. 2001 DAMSON RD. CYNNAUD		210,000	
3. 2736 NE 115TH ST. SEATTLE		300,000	
4. 16420 4TH AVE NW - SEATTLE		286,000	
(Attach additional sheets if needed)			
Other Assets (list all assets not included above, including assets acquired postpetition, if any)			
TOTAL ASSETS		1,737,426.27	
LIABILITIES			
Pre-petition Liabilities			
Secured Debt (Schedule D)		1,395,000.00	
Priority Unsecured Debt (Schedule E)		197,000.00	
Unsecured Debt (Schedule F)			
Total Pre-petition Liabilities		1,592,000.00	
Post-petition Liabilities			
Mortgage/Rent Payments Due		9,300.00	
Other Secured Debt			
Unpaid Real Property Taxes			
Other Unpaid Taxes (specify)			
Other Unpaid Debts (specify)			
Total Post-petition Liabilities			
TOTAL LIABILITIES		1,601,300	
NET WORTH (TOTAL ASSETS MINUS TOTAL LIABILITIES)		(363,873.73)	

Debtor

KARL REINICE

Case Number

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09-19609

Report Mo/Yr

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OCT 2009**UST-22, SUMMARY OF RECEIPTS**

INSTRUCTIONS: Complete each category and provide the net receipts total for the month. Use the Notes section to explain or itemize receipts when appropriate (e.g., rental income from more than one property).

Type of Receipt	Gross Amount	Net Amount
Wages or salary	0	0
Social security, pension, or 401k distributions		
Rental income (itemize by property) <u>16420 4TH AVE NW</u> <u>22001 RAMSON AD</u>	<u>2,000.00</u> <u>1,300.00</u>	
Collection of accounts receivable or note payable (specify source)		
Loan or other financing proceeds (specify source)		
Proceeds from sale of real property		
Proceeds from sale of personal property		
Other (explain)		
TOTAL RECEIPTS FOR THIS MONTH		<u>3,300.00</u>

Notes:

Debtor

KARL REINICK

Case Number

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OCT. 2009

UST-23, SUMMARY OF DISBURSEMENTS

INSTRUCTIONS: BEFORE COMPLETING THIS PAGE, prepare a UST-23 CONTINUATION SHEET (see next page) for each financial account or other source of the debtor's funds. The disbursement total from each CONTINUATION SHEET will be used to complete this SUMMARY OF DISBURSEMENTS page.

QUARTERLY FEES: Each month the debtor must provide an accurate disbursement total for purposes of calculating its obligation to pay statutory fees to the U.S. Trustee pursuant to 28 U.S.C. § 1930 (a)(6). The disbursement total includes all payments made by the bankruptcy estate during the reporting month, whether made by the debtor or another party for the debtor. It includes checks written and cash payments. It also includes payments made pursuant to a sale or liquidation of the debtor's assets. Typically, the only transactions excluded from the disbursement total are transfers among estate accounts during the same reporting month.

A fee payment is due 30 days after the end of each calendar quarter, or on **April 30, July 31, October 31, and January 31**, respectively. The debtor is reminded that the initial fee billing for each quarter is only an estimate*. Accordingly, when payment is due the debtor is responsible for calculating disbursements for the entire quarter (or portion thereof the debtor is in Chapter 11) and for paying the correct fee. Failure to pay statutory fees to the U.S. Trustee is cause for conversion or dismissal of the case. If you have questions about how to compute the disbursement total, please call the Bankruptcy Analyst assigned to your case at (206) 553-2000. Finally, a copy of the statutory fee schedule may be found on the U.S. Trustee's website at: www.usdoj.gov/ust/r18/s_home.htm (see Library page).

* By necessity, the fee billings are processed before the due date for the debtor's last monthly financial report for the quarter. Upon receipt of the debtor's report for the third month of the quarter, the U.S. Trustee adjusts the amount billed for that quarter, as appropriate.

Summary of Disbursements

Total disbursements from all UST-23 Continuation Sheet(s)	
Cash payments not included in total above (if any)	
Disbursements made by another party on behalf of the debtor (if any)	
Disbursements made pursuant to a sale of the debtor's assets (if any)	
TOTAL DISBURSEMENTS THIS MONTH FROM ALL SOURCES	
<p>At the end of this reporting month, did the debtor have any <u>delinquent</u> statutory fees owing to the U.S. Trustee?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes", list each quarter that is delinquent and the amount due.</p>	

(UST-23 CONTINUATION SHEETS, with attachments, should follow this page.)

Debtor

KARL REINKE

Case Number

⇒

09-19609

Report Mo/Yr

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OCT. 2009**UST-23 CONTINUATION SHEET, FINANCIAL ACCOUNT DETAIL**

INSTRUCTIONS: Prepare a CONTINUATION SHEET for each financial or brokerage account or other source of the debtor's funds and attach supporting documents as indicated on the checklist below.

Depository (bank) name	⇒	<u>BANK OF AMERICA</u>
Account number	⇒	<u>9884 4149</u>
Purpose of this account (select one): <input checked="" type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Investment/brokerage <input type="checkbox"/> IRA/retirement <input type="checkbox"/> Funds held in trust by debtor's attorney <input type="checkbox"/> Other (explain) _____		
Beginning cash balance		<u>51.09</u>
Add:	Transfers in from other accounts	<u>0.00</u>
Loan or financing proceeds deposited to this account (Identify source)		<u>0.00</u>
Other receipts deposited to this account		<u>0.00</u>
Total cash available this month		
Subtract:	Transfers out to other accounts	<u>300.00</u>
Disbursements from this account (all checks written for the month plus cash withdrawals, if any)		<u>240.97</u>
		Include this number when calculating "Total disbursements from all UST-23 Continuation Sheets" on line 1 of UST-23, Summary of Disbursements.
Adjustments, if any (explain)		
Ending cash balance		<u>(489.98)</u>
Does this CONTINUATION SHEET include the following supporting documents, as required:		
A monthly bank statement (or attorney's trust account statement);		Yes No
If applicable, a detailed statement of funds received or disbursed by another party for the debtor.		<input checked="" type="checkbox"/> <input type="checkbox"/>

UST-23 CONTINUATION SHEET, Number _____ of _____

Bank of America|Online Banking|Account History



Online Banking

Myaccess Checking
[Balance Sheet](#) [Return](#) [Portrait View](#)
SummaryMyaccess Checking - ~~994149~~

From: 10/06/09 Through: 10/14/09

Starting Balance:	\$51.09
-8 Withdrawals:	-\$540.97
+0 Deposits:	\$0.00
Ending Balance:	-\$489.88

Date	Description	Withdrawal	Deposit	Balance
10/14/09	DOMESTIC NON-BANKOFAMERICA ATM CHARGE	-\$6.00		-\$489.88
10/14/09	Extended Overdrawn Balance Charge	-\$35.00		-\$483.88
10/14/09	OVERDRAFT ITEM FEE	-\$35.00		-\$448.88
10/13/09	INVESTMENT AMERICAN FUNDS 000100074511301	-\$200.00		-\$413.88
10/09/09	OVERDRAFT ITEM FEE	-\$35.00		-\$213.88
10/08/09	INS. PREM PREMATIC CORP MLB03FR75933	-\$94.97		-\$178.88
10/07/09	OVERDRAFT ITEM FEE	-\$35.00		-\$83.91
10/06/09	ING DIRECTREINKE,KARL J 000000053689018	-\$100.00		-\$48.91

* May not show deposits or withdrawals made since the last business day or outstanding Check Card authorizations.

Debtor

KARL REINICK

Case Number

⇒

09-19609

Report Mo/Yr

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OCT. 2009**UST-23 CONTINUATION SHEET, FINANCIAL ACCOUNT DETAIL**

INSTRUCTIONS: Prepare a CONTINUATION SHEET for each financial or brokerage account or other source of the debtor's funds and attach supporting documents as indicated on the checklist below.

Depository (bank) name Account number	⇒ ⇒	<u>WELLS FARGO</u> <u>722316</u>
Purpose of this account (select one): <input checked="" type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Investment/brokerage <input type="checkbox"/> IRA/retirement <input type="checkbox"/> Funds held in trust by debtor's attorney <input type="checkbox"/> Other (explain) _____		
Beginning cash balance		<u>207.07</u>
Add:	Transfers in from other accounts	<u>0.00</u>
	Loan or financing proceeds deposited to this account (identify source)	<u>0.00</u>
<u>INTEREST</u>	Other receipts deposited to this account	<u>.01</u>
Total cash available this month		
Subtract:	Transfers out to other accounts	<u>207.08</u>
Disbursements from this account (all checks written for the month plus cash withdrawals, if any)		⇒ <u>0.00</u>
		Include this number when calculating "Total disbursements from all UST-23 Continuation Sheets" on line 1 of UST- 23, Summary of Disbursements.
Adjustments, if any (explain)		
Ending cash balance		<u>207.08</u>
Does this CONTINUATION SHEET include the following supporting documents, as required:		
A monthly bank statement (or attorney's trust account statement);		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If applicable, a detailed statement of funds received or disbursed by another party for the debtor.		<input type="checkbox"/> <input type="checkbox"/>

UST-23 CONTINUATION SHEET, Number _____ of _____

WELLS
FARGO

PMA account 8555722316 ■ October 1, 2009 - October 31, 2009 ■ Page 4 of 7

PMA® Prime Checking Account**Activity summary**

Balance on 10/1	207.07
Deposits/Additions	0.01
Withdrawals/Subtractions	- 0.00
Balance on 10/31	\$207.08

Account number: **8555722316****KARL REINKE**

Wells Fargo Bank, N.A., Washington (Member FDIC)

Questions about your account: **1-800-742-4932**

Worksheet to balance your account and General Statement Policies can be found towards the end of this statement.

Overdraft protection

Your account is linked to the following for Overdraft Protection:

■ Savings - 106026582

Interest you've earned

Interest earned this month	\$0.01
Average collected balance this month	\$207.07
Annual percentage yield earned	0.06%
Interest paid this year	\$0.13

Transaction history

Date	Description	Check No.	Deposits/ Additions	Withdrawals/ Subtractions	Ending Daily Balance
Beginning balance on 10/1					207.07
10/30	Interest Payment		0.01		207.08
Ending balance on 10/31					207.08
Totals			\$0.01	\$0.00	

Your Card (Wells Fargo ATM Cards, Check Cards, or Cash Cards) must not be used for any unlawful purpose (for example, funding any account that is set up to facilitate Internet gambling). You agree to take steps to ensure that you will not use your Card or any linked account for any transaction that is illegal under the laws governing your account. In addition, the Bank reserves the right to deny transactions or authorizations from merchants apparently engaging in the Internet gambling business or identifying themselves through the Card transactions record or otherwise as engaged in such business.



PMA account 8555722316 ■ October 1, 2009 - October 31, 2009 ■ Page 5 of 7

Wells Fargo Performance Savings

Activity summary

Balance on 10/1	0.03
Deposits/Additions	0.00
Withdrawals/Subtractions	- 0.00
Balance on 10/31	\$0.03

Account number: **1736026582****KARL REINKE**

Wells Fargo Bank, N.A., Washington (Member FDIC)

Questions about your account: **1-800-742-4932**Worksheet to balance your account and General
Statement Policies can be found towards the
end of this statement.

Interest you've earned

Interest paid on 10/31	\$0.00
Average collected balance this month	\$0.00
Annual percentage yield earned	0.00%
Interest paid this year	\$0.00



PMA account 8555722316 ■ October 1, 2009 - October 31, 2009 ■ Page 6 of 7

Home Mortgage

Property address

923 N 76Th Street
Seattle, WA 98103

Account number: 708-0156626368**KARL REINKE**

Wells Fargo Home Mortgage

Loan summary

Original date of mortgage	11/17/06
Interest rate	5.875%
Unpaid principal balance* as of 10/31	\$372,550.86
Current monthly payment	\$2,724.25
Escrow balance	\$0.00
Interest paid year-to-date	\$7,317.77
Taxes paid year-to-date	\$4,215.96

*Contact Customer Service for your payoff balance.

■ This is a summary statement of your Home Mortgage account. You will continue to receive a complete periodic statement.



PMA account 8555722316 ■ October 1, 2009 - October 31, 2009 ■ Page 7 of 7

Worksheet to balance your checking account

1. Go through your check register and mark each check (this includes cancelled, converted and substitute checks that may appear on your statement), withdrawal, ATM transaction, payment, deposit or other credit listed in the "Transaction history" section of your statement. Be sure your register shows any interest or dividends paid into your account and any service charges, automatic payments or transfers withdrawn from your account during this statement period.

2. Using the chart below, list any outstanding, converted or substitute checks, as well as any ATM withdrawals, payments or any other withdrawals (including any from previous months) which are listed in your register but are not shown on your statement.

3. Balance your account by filling in the spaces below.

A The ending balance shown on your statement

§

 ADD

B Any deposits listed in your register or transfers into your account which are not shown on your statement

§

\$

\$

S

\$ → \$

 CALCULATE SUBTOTAL

(Add parts **A** and **B**)

§

 SUBTRACT

C Total of outstanding checks and withdrawals from the chart at right

\$

 **CALCULATE**

ENDING BALANCE

(Part **A** + Part **B** - Part **C**)

This amount should be the same as the current balance shown in your check register.

\$

Items outstanding		
Check number	Amount	
Total	\$	

General statement policies for Wells Fargo Bank

■ To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts. You have the right to dispute the accuracy of information that Wells Fargo Bank, N.A. has furnished to a consumer reporting agency by writing to us at Wells Fargo Servicing, P.O. Box 14415, Des Moines, IA 50306-3415. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

■ **Checking account information.** After balancing your checking account, please report any differences to us as soon as possible but no later than within 30 days. Special provisions, including a reporting period of up to 60 days, apply if the difference involves an electronic funds transfer. These provisions are explained below.

■ In case of errors or questions about your electronic transfers, telephone us at the number printed on the front of this statement or write us at: Wells Fargo Bank, 735 West Wisconsin Avenue, Milwaukee, WI 53201-2057 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number (if any).

2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

■ Deposit and loan products, including PMA Package, offered by Wells Fargo Bank, N.A., Member FDIC.

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Debtor

KARE REINKE

Case Number

⇒

09-19609

Report Mo/Yr

⇒

OCT-2009

UST-23 CONTINUATION SHEET, FINANCIAL ACCOUNT DETAIL

INSTRUCTIONS: Prepare a CONTINUATION SHEET for each financial or brokerage account or other source of the debtor's funds and attach supporting documents as indicated on the checklist below.

Depository (bank) name Account number	⇒ ⇒	ING DIRECT 54223400
Purpose of this account (select one): <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Investment/brokerage <input type="checkbox"/> IRA/retirement <input type="checkbox"/> Funds held in trust by debtor's attorney <input type="checkbox"/> Other (explain) _____		
Beginning cash balance		910.13
Add:	Transfers in from other accounts	100.00
	Loan or financing proceeds deposited to this account (identify source)	0.00
INTEREST	Other receipts deposited to this account	1.09
Total cash available this month		1,011.22
Subtract:	Transfers out to other accounts	0.00
	Disbursements from this account (all checks written for the month plus cash withdrawals, if any)	⇒ 0.00
		Include this number when calculating "Total disbursements from all UST-23 Continuation Sheets" on line 1 of UST- 23, Summary of Disbursements.
Adjustments, if any (explain)		
Ending cash balance		1,011.22
Does this CONTINUATION SHEET include the following supporting documents, as required:		
A monthly bank statement (or attorney's trust account statement);		Yes No
If applicable, a detailed statement of funds received or disbursed by another party for the debtor.		<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

UST-23 CONTINUATION SHEET, Number _____ of _____



ING DIRECT
Save Your Money®

Karl J Reinke
923 N. 76th St.
Seattle WA 98103

The mortgage with no dirty secrets

Saving for your first home or planning to refinance soon? If so, the adjustable rate Orange Mortgage could save you thousands.

Call 1-800-ING-9331 or visit ingdirect.com/orangemortgage to learn more.

Since you became an Orange Saver on 09/20/2006,
your account(s) have earned:

\$161.22

Customer Number ~~422~~ 3400

Your Savings Summary as of 10/31/2009

Account Type	Nickname	Account Number	Account Balance	Joint Name
Orange Savings Account	vacation	3600 9018	\$1,011.22	

Your Orange Savings Account Activity

Account: vacation Current Interest Rate: 1.292% Annual Percentage Yield Earned: 1.30% Interest Life To Date: \$161.22
Year to date Interest: \$15.11

Activity	Date	Amount	Balance
Opening Balance	10/01/2009		\$910.13
Preauthorized Deposit from linked BANK OF AMERICA, N.A. (SFNB) checking account XXXX4149	10/05/2009	\$100.00	\$1,010.13
Monthly Interest Paid	10/31/2009	\$1.09	\$1,011.22
Closing Balance	10/31/2009		\$1,011.22

Your email address is: kjr57@hotmail.com. Update this and all your information at ingdirect.com in the My Info section.

ingdirect.com
Contact Us: sales@ingdirect.com

Interactive Phone Service: 1-888-ING-7868
Illustrations of New Products: 1-888-ING-9727

Orange Direct Loans: 1-800-ING-9331
Mutual Funds: 1-866-BUY-FUND

RD: Box 63
St. Cloud, MN 56302

Debtor KARL REINKE

Case Number ⇒

Report Mo/Yr ⇒

09-19609
OCT-2009**UST-24 PART A, OTHER FINANCIAL
DISCLOSURES - PROPERTY SALES****INSTRUCTIONS:** Fully answer each question and attach additional sheets if necessary to provide a complete response.

Yes No

Question 1 - Sale or Abandonment of the Debtor's Assets. Did the debtor, or another party on behalf of the debtor, sell, transfer, or otherwise dispose of any of the debtor's assets during the reporting month? Include only sales out of the ordinary course. *An escrow statement or similar supporting document must be attached for any sale of real estate and show all disbursements from the gross sale amount including debt payoffs and sales commissions.*

Asset Description	Date of Court Approval	Closing Date	Method of Disposition	Gross Sales Price	Net Proceeds Received (& Date)	Escrow Statement or Auctioneers Report Attached?
1.						
2.						
3.						
4.						
5.						

Total _____

Any disbursements made from escrow or trust accounts from the proceeds of the above transactions should also be included on the line of UST-14 entitled "Disbursements made by other parties for the debtor."

Attach additional pages as needed

Question 2 - Financing. During the reporting month, did the debtor receive any funds from an outside funding source, including relatives?

Date of Court Approval	Amount	Source of funds	Date Received

Total _____

Debtor

KARL REINICK

Case Number

⇒

09-19609

Report Mo/Yr

⇒

OCT. 2009

**UST-24 PART B, OTHER FINANCIAL
DISCLOSURES - INSURANCE & OTHER**

			Yes	No
Question 3 - Insurance Coverage. Did the debtor renew, modify, or replace any insurance policies during this reporting month?			<input type="checkbox"/>	<input checked="" type="checkbox"/>
Renewals:				
<u>Provider</u>	<u>New Premium</u>	<u>Is a Copy Attached to this Report?</u>		
Changes:				
<u>Provider</u>	<u>New Premium</u>	<u>Is a Copy Attached to this Report?</u>		
Were any insurance policies canceled or otherwise terminated for any reason during the reporting month? If yes, explain.			<input type="checkbox"/>	<input checked="" type="checkbox"/>

Question 4 - Payments on Pre-Petition Unsecured Debt (requires court approval). Did the debtor, or another party on behalf of the debtor, make any payments during this reporting month on pre-petition unsecured debt? If yes, disclose each payment and include payee's name and purpose, payment date, dollar amount, and date of court approval.

NO

Question 5 - Payments to Attorneys and Other Professionals (requires court approval). Did the debtor, or another party on behalf of the debtor, make any payments during this reporting month to a professional such as an attorney, accountant, realtor, appraiser, auctioneer, business consultant, or other professional person? If yes, list each payment and include professionals name and description of services performed, payment date, dollar amount, and date of court approval.

	<u>Payee</u>	<u>Description of Services</u>	<u>Date of Court Approval</u>	<u>Payment Date</u>	<u>Amount</u>
1.					
2.					
3.					

Total \$ _____

Question 6 - Estimated Professional Fees. List estimated post-petition professional fees and expenses. To the extent possible, use billing statements to report the actual amounts due. If billing statements have not been received, use the best information available to estimate the fees and costs.

Question 7 - Significant Events. Explain any significant new developments during the reporting month.

Question 8 - Case Progress. Explain what progress the debtor made during the reporting month toward confirmation of a plan of reorganization.

Debtor

Karl Retnik

Case Number

⇒

09-19609

Report Mo/Yr

⇒

OCT-2009

Monthly Financial Reports

(due on the 15th of the subsequent month)

Original Place of Filing:


Seattle, WA ▼	Tacoma, WA ▼
File the <u>original</u> with the court: United States Bankruptcy Court United States Courthouse 700 Stewart Street, Suite 6103 Seattle, WA 98101	File the <u>original</u> with the court: United States Bankruptcy Court 1717 Pacific Avenue, Suite 2100 Tacoma, WA 98402
AND serve a <u>copy</u> on each of the following:	
<ul style="list-style-type: none"> ● Each member of any committees elected or appointed pursuant to the Bankruptcy Code, and to their authorized agents. ● Debtor's counsel. 	
NOTE: If the report is electronically filed with the Court, the United States Trustee will be served automatically. There is no need to serve an additional copy on the United States Trustee.	

STATUTORY FEE SCHEDULE		
If the debtor's disbursements for the calendar quarter are within these amounts. . .		Then the quarterly fee due is. . .
From	To	
-0-	\$14,999.99	\$325
\$15,000	\$74,999.99	\$650
\$75,000	\$149,999.99	\$975
\$150,000	\$224,999.99	\$1,625
\$225,000	\$299,999.99	\$1,950
\$300,000	\$999,999.99	\$4,875
\$1,000,000	\$1,999,999.99	\$6,500
\$2,000,000	\$2,999,999.99	\$9,750
\$3,000,000	\$4,999,999.99	\$10,400
\$5,000,000	\$14,999,999.99	\$13,000
\$15,000,000	\$29,999,999.99	\$20,000
\$30,000,000 or more		\$30,000

Make check payable to:	For calendar quarter ending. . .	A fee payment is due on. . .
United States Trustee	March 31	April 30
Mail quarterly fee payments to:	June 30	July 31
US Trustee Program Payment Center	September 30	October 31
PO Box 70937	December 31	January 31
Charlotte, NC 28272-0937		
Send your payment and quarterly fee payment stub ONLY . Any disbursement stubs, monthly operating reports, correspondence, court notices, etc., sent to the lockbox will be destroyed .		

American Funds - Historical Account Balance

Page 1 of 1

Historical account balance [Help with this page](#) [Print this page](#)[* Return to Account Summary](#)

As of October 31, 2009

Total value: \$10,387.55

Non-retirement accounts: \$0.00

Retirement accounts: \$10,387.55

[Select a different date](#)**Retirement accounts**

CB&T CUST IRA KARL J REINKE		Account: 11301	
Fund Name	Shares October 31, 2009	NAV October 31, 2009	Market Value October 31, 2009
NEW PERSPECTIVE FUND - A (07)	232.936	\$24.11	\$5,616.09
WASHINGTON MUTUAL INVESTORS FUND - A (01)	207.816	\$22.96	\$4,771.46
Account Total:			\$10,387.55

As of October 31, 2009

Total value: \$10,387.55

Non-retirement accounts: \$0.00

Retirement accounts: \$10,387.55

View the historical balance for a different date:To view your historical balances, enter a specific date or select a quarter-end period using the drop-down menu and click **Submit**.mm / dd / yyyy **OR** Select a quarter-end period:  **Submit »**

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